## BOARD LETTER – SUMMARY SHEET HEALTH AND MENTAL HEALTH SERVICES CLUSTER

AGENDA REVIEW	5/14/2014
BOARD MEETING	6/4/2014
SUPERVISORIAL DISTRICT	ALL
DEPARTMENT	MENTAL HEALTH
SUBJECT	APPROVAL TO RENEW 67 EXPIRING LEGAL ENTITY AGREEMENTS FOR MENTAL HEALTH SERVICES
PROGRAM	Legal Entity Agreements for the provision of mental health services
DEADLINES	6/30/2014
COST & FUNDING	The FY 2014-15 annual MCA for each Legal Entity Agreement is shown on Attachment B totaling \$397,080,784 inclusive of \$18,715,373 one time State MHSA INN funding. The FY 2014-15 MCAs are funded from the following sources:
	1) State Revenues (including MHSA): \$182,770,861 2) Federal Revenues: \$160,957,590 i) MCE Federal Financial Participation (FFP): \$17,583,041 3) Intrafund Transfers: \$14,287,640 4) NCC/Sales Tax Realignment: \$12,195,775 5) 2011 Sales Tax Realignment (AB 109): \$7,671,615 6) Grant \$397,080,784
	The future fiscal years funding will be requested through DMH's annual budget request process.
	There is no net County cost impact associated with the recommended actions.
PURPOSE OF REQUEST	Board approval will allow DMH to enter into new LE Agreements with 67 contract agencies whose current LE Agreements are due to expire on June 30, 2014. Board approval of these Agreements is necessary for the provision of uninterrupted mental health services to severely and persistently mentally ill adults, seriously emotionally disturbed (SED) children and adolescents, and the families of these mentally ill individuals throughout the County of Los Angeles.  Board approval will also allow DMH to extend MHSA Innovation (INN) Program funding. The MHSA INN component, as defined in AB 1467, a Trailer Bill to the FY 2012-13 State Budget, defines the purpose of an INN project as increasing service access, particularly to underserved groups, increasing the quality and outcomes of mental health services and/or promoting interagency collaboration. Further, INN projects a prostice including adopting
	health practices or approaches or make a change to an existing practice including adapting it for a new setting or community.
SUMMARY/ ISSUES  (Briefly summarize program and potential issues or concerns. Identify changes, if any, to level of	These LE Agreements with mental health services contractors provide for a broad range of mental health services to be delivered to severely and persistently mentally ill adults, SED children and adolescents, and the families of these mentally ill individuals, pursuant to the California Welfare and Institutions Code section 5600 et seq. These mental health services include an array of services such as assessment, evaluation, treatment, day care, pre-crisis intervention, case management, medication, respite care, living arrangements, community skill training, referrals, consultation, and community services.
funding or staffing; how funding will be utilized and why best	The revised LE Agreement boilerplate (Attachment A) includes all the recent countywide contracting updates and required changes such as the time off for voting provision. In addition, the revised Agreement format includes a revised Financial Exhibit which reflects a change from Title XXI State Children's Health Insurance Program (formerly Healthy

use; prior accomplishments; and for BLs involving contracts, also note changes to the contract term.)	Families Program) to Title XXI Medicaid Children's Health Insurance Program, a change in the cash flow advance provision, and a change in the Negotiation Package instructions. Finally, we are also revising Attachment III, Financial Summary.
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